



## **Supporting Breastfeeding**

As a child care professional your support of mothers who are breastfeeding is important. Breast milk is the perfect nutrition for infants and provides many health benefits including:

- It's easier for the baby to digest
- It has all the nutrients, calories, and fluids a baby needs to be healthy
- It has growth factors that ensure the best development of the baby's organs
- It has substances that protect against many diseases and infections
- Breastfed babies are less likely to have:
  - Ear infections
  - o Diarrhea
  - Pneumonia, wheezing, and bronchiolitis
  - Other bacterial and viral infections, such as meningitis
- Research also suggests that breastfeeding may help to protect against obesity, diabetes, sudden infant death syndrome (SIDS), asthma, eczema, colitis, and some cancers.

The American Academy of Pediatrics (AAP) recommends that mothers exclusively breastfeed their infants for the first six month of life. Then at six months, age-appropriate foods are added to the infant's diet. AAP recommends that mothers continue to breastfeed until the child is at least one year of age.

The following information will help you support breastfeeding mothers and develop your policies and procedures for serving breast (human) milk.

## Special Instructions for the Storage and Preparation of Human Milk

- Expressed human milk should be placed in a clean and sanitary bottle with a nipple that fits tightly or into a clean and sanitary sealed container to prevent spilling during transport to home or to the child care facility. Only cleaned and sanitized bottles and nipples should be used in feeding. The bottle or container should be properly labeled with the infant's full name and the date/time the milk was expressed. The bottle or container should immediately be stored in the refrigerator on arrival.
- Bottles made of plastics containing BPA or phthalates should be avoided (labeled with #3, #6, or #7). Glass bottles or plastic bottles labeled BPA-free or with #1, #2, #4, or #5 are acceptable.
- Non-frozen human milk should be transported and stored in the bottle to be used to feed the
  infant. The bottle should be labeled with the date/time of collection and child's full name. The
  bottle of human milk should be kept refrigerated.
- Frozen human milk may be transported and stored in single use plastic bags and placed in a freezer (not a compartment within a refrigerator but either a freezer with a separate door or a stand alone freezer).
- The caregiver/teacher should check for the infant's full name and the date/time on the bottle so that the oldest milk is used first.
- Human milk should be defrosted in the refrigerator if frozen, and then heated briefly in bottle warmers or under warm running water so that the temperature does not exceed 98.6°F. If there is insufficient time to defrost the milk in the refrigerator before warming it, then it may be defrosted in a container of running cool tap water, very gently swirling the bottle periodically to evenly distribute the temperature in the milk. Some infants will not take their mother's milk unless it is warmed to body temperature, around 98.6°F.

- A microwave should never be used to defrost or warm milk because it can cause hot spots that could cause the baby to be burned. Too much heat can destroy the nutrient quality in human milk.
- After warming, bottles should be mixed gently by swirling. Never shake human milk as this could
  destroy some of the cellular components of the milk. The temperature of the milk should be
  tested before feeding.
- The mother's own expressed milk should only be used for her own infant. Infant formula should not be used for a breastfed infant without the mother's written permission.
- Human milk containers with significant amount of contents remaining (greater than one ounce)
  may be returned to the parent at the end of the day as long as the child has not fed directly
  from the bottle.
- Expressed human milk should be discarded if it is in an unsanitary bottle, is curdled, smells
  rotten, has been sitting out after being fed to an infant, or has not been stored following the
  storage guidelines below.

## **Guidelines for Storage of Fresh Human Milk**

Location of Storage	Temperature that Should be Maintained	Maximum Recommended Storage Duration
Room Temperature	60°F - 85°F (16°C -29°C)	3 - 4 hours optimal 6 - 8 hours acceptable under very clean conditions
Refrigerator	<39°F (4°C)	72 hours optimal 5 - 8 days under very clean conditions
Freezer	<0°F (-17°C)	6 months optimal 12 months acceptable

## **Additional Information:**

Labels with the infant's name and date/time should not come off when washing and handling. This is especially important when the frozen bottle is thawed in running tap water. There may be several bottles from different mothers being thawed and warmed at the same time in the same place.

Refrigerator and freezer temperatures should be monitored and recorded on a daily log to ensure that human milk is stored at the appropriate temperature.

Once an infant begins drinking expressed human milk from a bottle (or cup), bacteria growth can occur. It is important to discard remaining milk after an infant has finished feeding.

Although human milk is a body fluid, it is not necessary to wear gloves when feeding or handling human milk. Unless there is visible blood in the milk, the risk of exposure to infectious organisms either during feeding or from milk that the infant regurgitates is not significant.

References:

Breastfeeding Your Baby (Copyright © 2005 American Academy of Pediatrics, Updated 8/2012) <a href="https://www.healthychildren.org/English/ages-stages/baby/breastfeeding/Pages/Why-Breastfeed.aspx">https://www.healthychildren.org/English/ages-stages/baby/breastfeeding/Pages/Why-Breastfeed.aspx</a> 11/21/2015

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